

## Application Data Sheet

### Application Information

Application Type::	Regular
Subject Matter::	Utility
Suggested classification::	
Suggested Group Art Unit::	
CD-ROM or CD-R?::	None
Computer Readable Form (CRF)?::	No
Title::	SYSTEM AND METHOD FOR REGISTERING AN IMAGE WITH A REPRESENTATION OF A PROBE
Attorney Docket Number::	066243-0237 (141211)
Request for Early Publication?::	No
Request for Non-Publication?::	No
Suggested Drawing Figure::	1
Total Drawing Sheets::	5
Small Entity?::	No
Petition included?::	No
Secrecy Order in Parent Appl.?::	No

### Applicant Information

Applicant Authority Type::	Inventor
Primary Citizenship Country::	Netherlands
Status::	Full Capacity
Given Name::	Wenguang
Family Name::	Li
City of Residence::	Sugarland
State or Province of	Texas
Residence::	

**Country of Residence::** US  
**Street of mailing address::** 4831 Zachary Lane  
**City of mailing address::** Sugarland  
**State or Province of mailing address::** TX  
**Postal or Zip Code of mailing address::** 77479

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Curtis G.  
**Family Name::** Neason  
**City of Residence::** New York  
**State or Province of Residence::** New York

**Country of Residence::** US  
**Street of mailing address::** 318 E. 15th Street, #1-K  
**City of mailing address::** New York  
**State or Province of mailing address::** NY  
**Postal or Zip Code of mailing address::** 10003

**Applicant Authority Type::** Inventor  
**Primary Citizenship Country::** US  
**Status::** Full Capacity  
**Given Name::** Joel Q.  
**Family Name::** Xue  
**City of Residence::** Germantown  
**State or Province of Residence::** Wisconsin  
**Country of Residence::** US  
**Street of mailing address::** N105 W14572 Lincoln Drive

**City of mailing address::** Germantown  
**State or Province of mailing address::** WI  
**Postal or Zip Code of mailing address::** 53022

### **Correspondence Information**

**Correspondence Customer Number::** 33679  
**E-Mail address::** PTOMailMilwaukee@Foley.com

### **Representative Information**

<b>Representative Customer Number::</b>	33679	
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### **Domestic Priority Information**

<b>Application::</b>	<b>Continuity Type::</b>	<b>Parent Application::</b>	<b>Parent Filing Date::</b>

### **Foreign Priority Information**

<b>Country::</b>	<b>Application number::</b>	<b>Filing Date::</b>	<b>Priority Claimed::</b>

### **Assignee Information**

**Assignee name::**